

O I P E  
JUN 20 2001  
JC98  
U.S. PATENT & TRADEMARK OFFICE

PTO/SB/21 (6-95) (modified)  
Approved for use through 9/30/98, OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

2641

00 PTO  
Rev. 10/95

U.S. Department of Commerce  
Patent and Trademark Office

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

17

Attorney Docket Number

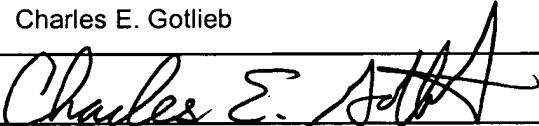
1094

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JUN 21 2001  
Group 2600

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Checklist and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Information Disclosure Statement/PTO/SB/08B	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Postcard
<input type="checkbox"/> Certified Copy of Priority Document	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Charles E. Gotlieb
Signature	
Date	June 14, 2001

### Certificate of Mailing

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Typed or printed name	Lauren Gellman
Signature	
Date	June 14, 2001

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# FREE TRANSMITTAL for FY 2001

TOTAL AMOUNT OF PAYMENT (\$ 0

Complete if Known	
Application Number	09/351,723
Filing Date	7/12/99
First Named Inventor	Robert C. Wohlsen
Examiner Name	Azad, A.
Group Art Unit	2641
Attorney Docket Number	1094

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## METHOD OF PAYMENT (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number 07-1738  
Deposit Account Name Charles E. Gotlieb

Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17.  
 Applicant Claims small entity status  
See 37 CFR 1.27

2.  Payment Enclosed

Check  Credit card  Money Order  Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
101	710	201	355
106	320	206	160
107	490	207	245
108	710	208	355
114	150	214	75
SUBTOTAL (1) (\$)			

### 2. EXTRA CLAIMS

	Extra	Fee from below	Fee Paid
Total Claims	22	- 22 =	<input type="text"/> X <input type="text"/> = <input type="text"/>
Independent Claims	3	- 3 =	<input type="text"/> X <input type="text"/> = <input type="text"/>
Multiple Dependent			<input type="text"/> <input type="text"/>

Fee Description			
Fee Code	Fee (\$)	Fee Code	Fee (\$)
103	18	203	9
102	80	202	40
104	270	204	135
109	80	209	40
110	18	210	9
SUBTOTAL (2) (\$)			

\*\*or number previously paid, if greater; For Reissues, see above

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2520	147	2520
112	920*	112	920*
113	1840*	113	1840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1390	218	695
128	1890	228	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1510	138	1510
140	110	240	55
141	1240	241	620
142	1240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	710	246	355
149	710	249	355
179	710	279	355
169	900	169	900
Other fee (specify)			
* Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$)

## SUBMITTED BY

Complete (if applicable)	
Name (Print/Type)	Charles E. Gotlieb
Registration No. (Attorney/Agent)	38,164
Signature	
Telephone	650-328-0100
Date	6/14/2001

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IN THE

UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED  
JUN 21 2001  
Group 2600

APPLICANT: Robert C. Wohlsen et. al.  
SERIAL NO: 09/351,723  
FILING DATE: 7/12/99  
TITLE: METHOD AND SYSTEM FOR IDENTIFYING A USER BY VOICE  
GROUP ART UNIT: 2641  
ATTY DOCKET NO: 1094  
EXAMINER: Azad, A.

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**CERTIFICATION OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner of Patents, Washington, D.C. 20231 on the date shown below:

Date: 6/14/2001

*Lauren Gellman*  
Lauren Gellman

THE HONORABLE COMMISSIONER OF PATENTS, WASHINGTON DC, 20231

AMENDMENT A UNDER 37 C.F.R. 1.111

SIR:

Responsive to the Official Action mailed 3/14/2001:

please amend the above-referenced application as follows: